



STATE BOARD OF EDUCATION
Old Capitol Building, PO BOX 47206
OLYMPIA WA 98504-7206
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MINIMUM BASIC EDUCATION REQUIREMENT COMPLIANCE

2005–06 School Year

SCHOOL DISTRICT NAME

CONTACT PERSON

TELEPHONE NUMBER

()

Check One

☐ In
Compliance ☐ Not In
Compliance

Total Instructional Hour Offerings (RCW 28A.150.220) (WAC 180-16-200)

- ☐ ☐ Kindergarten instructional offerings of 450 hours.
- ☐ ☐ Grades 1-12 offerings of a district-wide annual average of 1,000 hours.

K-3/4-12 Students to Classroom Teacher Ratio (RCW 28A.150.250) (WAC 180-16-210)

- ☐ ☐ The district ratio of FTE classroom students to FTE classroom teachers in Grades K-3 is no greater than the district ratio of FTE classroom students to FTE classroom teachers in Grades 4 and above.

Current and Valid Certificates (RCW 28A.400.100, RCW 28A.410.025) (WAC 180-16-220)

- ☐ ☐ All school district employees serving in positions requiring a professional education permit, certificate or credential do hold a current and valid permit, certificate, or credential.

(Note: If you have an approved out-of-endorsement waiver for a certificated staff member, you are NOT out of compliance. See attached form to report out-of-endorsement teaching assignments.)

Minimum 180-Day School Year (RCW 28A.150.220) (WAC 180-16-215)

- ☐ ☐ The school year consists of no less than 180 separate school days for students in Grades 1 and above and is accessible to all legally eligible students, including students with disabilities, 5 years of age and under 21 years of age who have not completed high school graduation requirements. If your district has a waiver from the 180-days school year requirement, the district-wide annual average instructional hour offerings must still be 1,000 hours.

Check One

In Compliance Not In Compliance

**180-Day Kindergarten School Year
(RCW 28A.150.220) (WAC 180-16-215)**

_____ The kindergarten program consists of no less than 180 half days, or the equivalent, per school year.
_____ 180 half days are offered.
_____ Less than 180 separate half days are offered in each kindergarten section and not less than 450 total program hour offerings are provided. (If this box is checked, attach a copy of the schedule.)

Note: A reduction petition from another grade level grouping **CANNOT** be borrowed to establish 450 hours as the equivalent to the 180 half days requirement.

_____ Kindergarten students attend school in another district(s). District name(s) _____

_____ Kindergarten was offered, but no students enrolled.

High School Credit Based on Performance

Yes No

_____ High schools in this district are currently awarding credit based on demonstrated performance that is not tied to a state minimum number of hours of instruction or instructional activities. If yes, please list the schools below. Please attach an additional page if needed. (WAC 180-51-050(6))

Potential Withholding of Funds for Noncompliance

The withholding of basic education allocation funding from a school district shall occur for a noncompliance... (see full text in WAC 180-16-195(3)(d)).

Certification of Compliance

We hereby certify that the board of directors has been apprised and that the _____ School District, County of _____, meets all the requirements relating to the minimum requirements of state basic education programs and, further, that all deviations from these rules and regulations of the Washington State Board of Education are recorded.

We understand that FORM SPI 1497 will not require back-up documentation to be attached; however, that back-up documentation may need to be provided for auditing purposes.

Signature of School District Superintendent

Date

Signature of Board President or Chair

Date



**OUT-OF-ENDORSEMENT ASSIGNMENTS
FOR THE 2004-05 SCHOOL YEAR (Previous School Year)**

Complete this page **only** if your school district placed teacher(s) in an out-of-endorsement assignment. Duplicate this page as needed. Complete one form for each out-of-endorsement assignment, and return it to the State Board of Education, Basic Education Assistance with FORM SPI 1497.

Name of Teacher _____ Certification Number _____

Number of Years Teaching Experience in this district _____

Endorsements on teacher's certificate _____

Out-of-Endorsement Assignment:

Grade Levels (if applicable) _____ Number of Out-of-Endorsement Periods/Hours Taught _____

Subject(s): _____

Number of Quarters/Semesters Taught: _____

Assistance provided:

I give my assurance that the above assignment for _____
TEACHER NAME

was made in compliance with WAC 180-82-105 through 180-82-110.

SIGNATURE OF SUPERINTENDENT OR DESIGNEE

DATE

TITLE

PHONE NUMBER